

# **Community & Family Health Services**

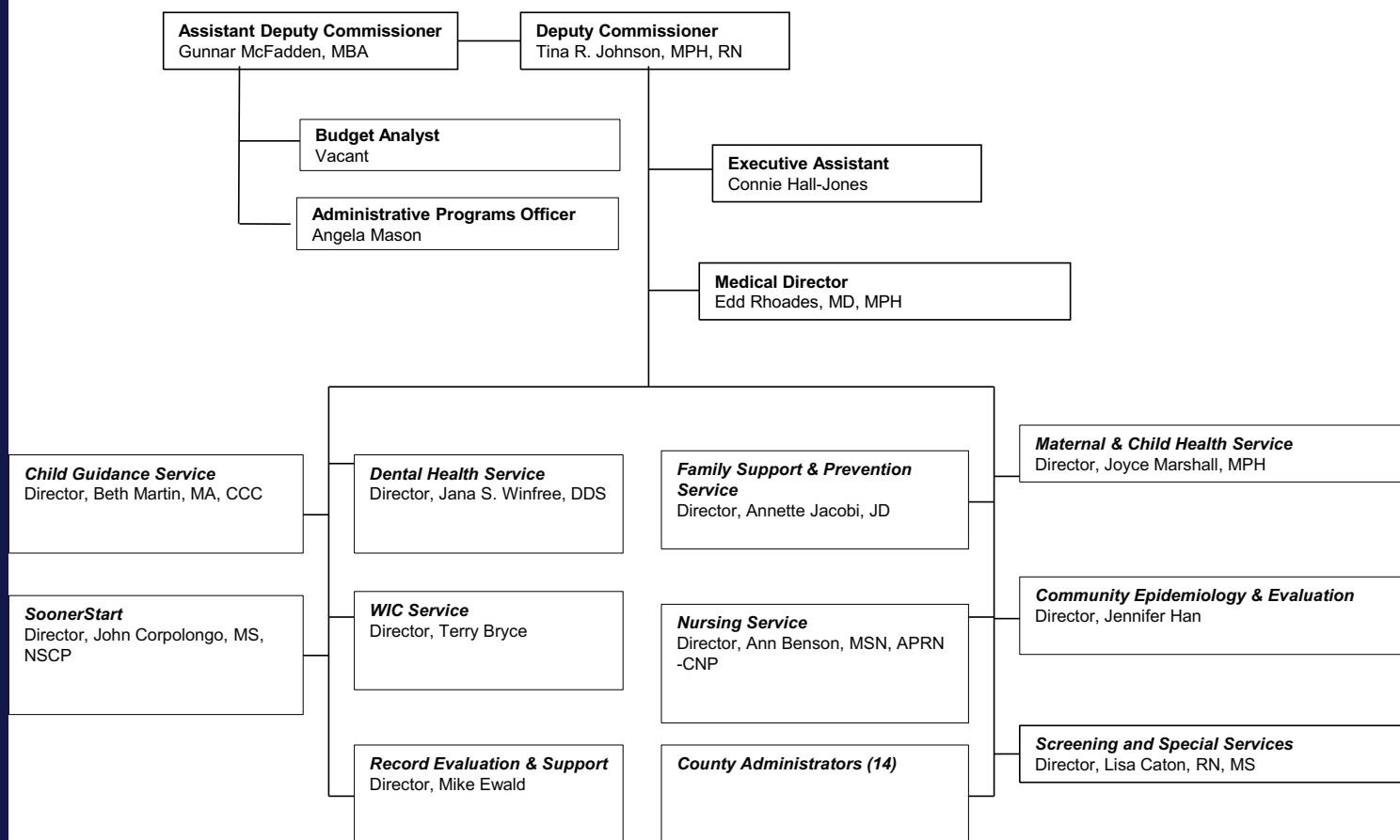
**July 10, 2017**

**Presented by Tina R. Johnson, MPH, RN  
Deputy Commissioner**



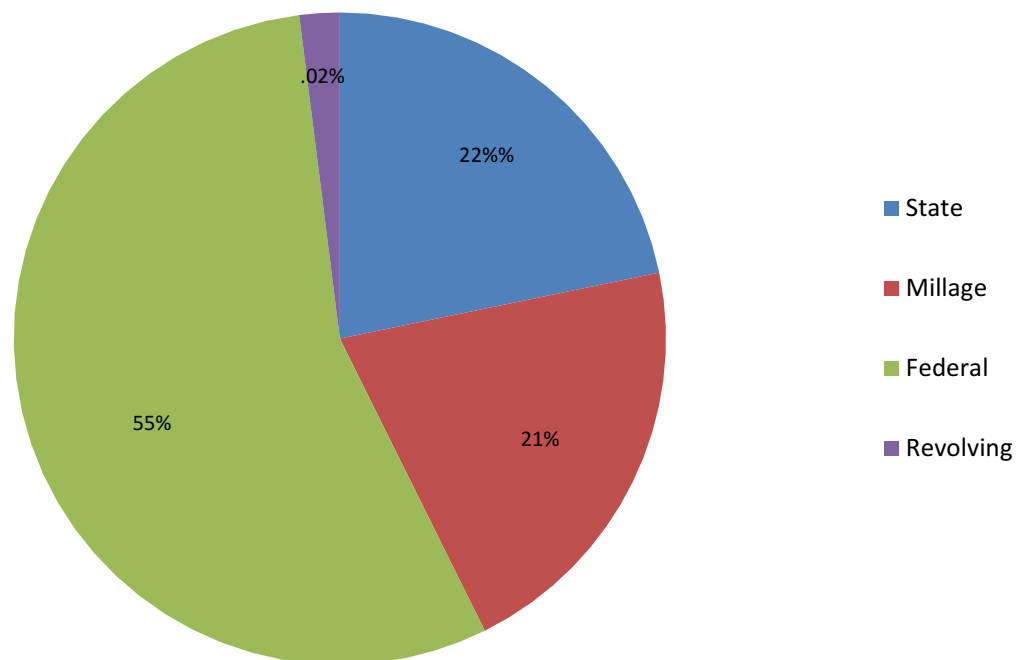
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# Community and Family Health Services



# COMMUNITY AND FAMILY HEALTH SERVICES COMBINED REVENUES

Total \$152.4M



Does not include \$61 M in WIC Food Costs



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# Community and Family Health Services Budget Summary

<i>Expenditure Category</i>	<i>Budget</i>	<i>Percent of Budget</i>
<b>Personnel</b>	<b>\$93,776,291</b>	<b>44.72%</b>
<b>WIC Food Costs</b>	<b>\$61,000,000</b>	<b>29.09%</b>
<b>Professional Services</b>	<b>\$25,995,457</b>	<b>12.40%</b>
<b>Other Expenditures</b>	<b>\$10,187,627</b>	<b>4.86%</b>
<b>Local Government Subdivisions</b>	<b>\$17,146,344</b>	<b>8.18%</b>
<b>Travel</b>	<b>\$1,359,067</b>	<b>.65%</b>
<b>Equipment</b>	<b>\$215,806</b>	<b>.10%</b>

C&FHS Average Full Time Equivalent Employees (FTE) for SFY 17 – 1,381



# **Nursing Service**

Director: Ann Benson, MSN, APRN-CNP

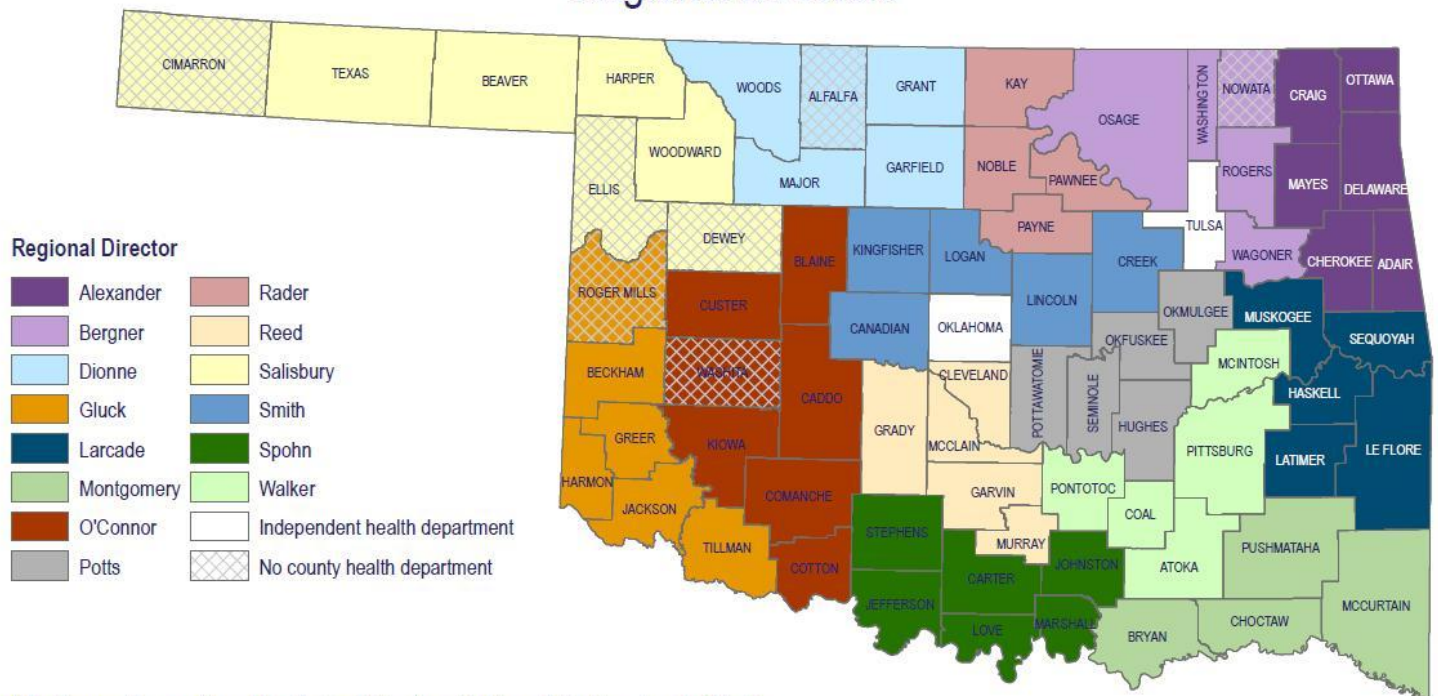
Responsible for the support of public health nurses statewide

- Provides clinical physician approved protocols
- Professional development, continuing education and training opportunities
- Public Health response and preparedness
- OSDH has approximately 420 nurses and 39 APRN's



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## Oklahoma State Department of Health Regional Directors



Data Source: Community and Family Health Services, Oklahoma State Department of Health

Effective: 05.30.2017



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# COUNTY HEALTH DEPARTMENTS

A basic function of county government, a county health department develops, implements and administers programs and services that are aimed at maintaining a healthy community.

- 68 county health departments
- 2 independent city-county health departments\*
- 7 counties without county health departments
- Local County Boards of Health
- Medical Directors

\*Oklahoma and Tulsa Counties operate city-county health departments independent from the OSDH health network.



# Potential Services and Programs Provided at a County Health Department

- Maternal and Child Health
- WIC (Women, Infant, Children)
- Consumer Protection
- HIV/STD
- Health Promotion
- Chronic Disease
- Acute Disease
- Dental Health
- SoonerStart
- Immunizations



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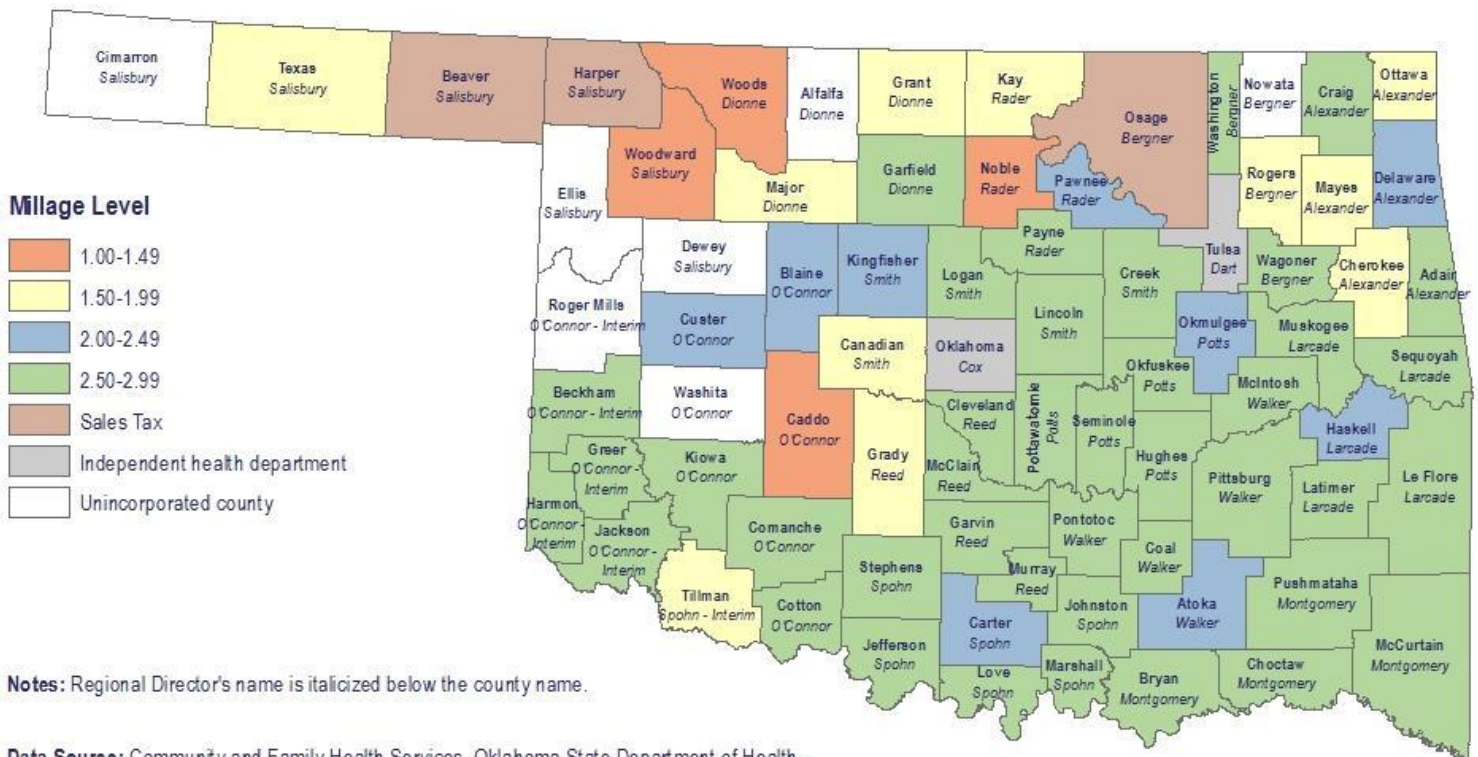
# COUNTY HEALTH DEPARTMENTS

Tax rates or millage levies are set by procedures in the Oklahoma Constitution or voted directly by the taxpayers. A mill is one-thousandth of a dollar. For convenience in Oklahoma, a tax rate (the sum of all mills levied) is expressed as dollars per thousand dollars of assessed value. A tax rate of 2 mills, for example, would be \$2 tax dollars.

For counties with established county health departments, the county residents have voted to fund a local county health department through either millage, sales tax, or a combination of the two. Millage rates vary from the minimum of 1 mill to a current maximum of 2.5 mills.



## County Health Department Millage Levels



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## SFY16 COUNTY HEALTH DEPARTMENT SERVICES/ENCOUNTERS/UNDUPLICATED CLIENTS

SFY 2016			
PROGRAM	SERVICES	ENCOUNTERS	UNDUPLICATED CLIENTS
ADULT SERVICES	20,225	9,901	7,106
CHILD HEALTH	104,372	48,092	39,698
CHILDREN FIRST*	28,568	28,568	3,097
DENTAL	6,320	1,044	439
EARLY INTERVENTION	132,381	130,822	10,471
FAMILY PLANNING	427,686	98,194	51,461
GUIDANCE	28,850	20,754	4,940
IMMUNIZATIONS	317,779	115,723	105,375
MATERNITY	1,507	401	118
STD	218,612	37,469	27,537
TAKE CHARGE	2,144	391	378
TUBERCULOSIS	92,785	38,093	17,201
WIC	1,730,476	191,695	106,840
<b>TOTAL **</b>	<b>3,111,705</b>	<b>721,147</b>	<b>374,661</b>

Notes: Numbers include Oklahoma City-County Health Department and Tulsa City-County Health Department

\*Children First data are queried from the Efforts to Outcomes (ETO) database.

\*\*Total information is a sum of above columns.



# COUNTY HEALTH DEPARTMENTS CONSUMER PROTECTION DEPARTMENTS

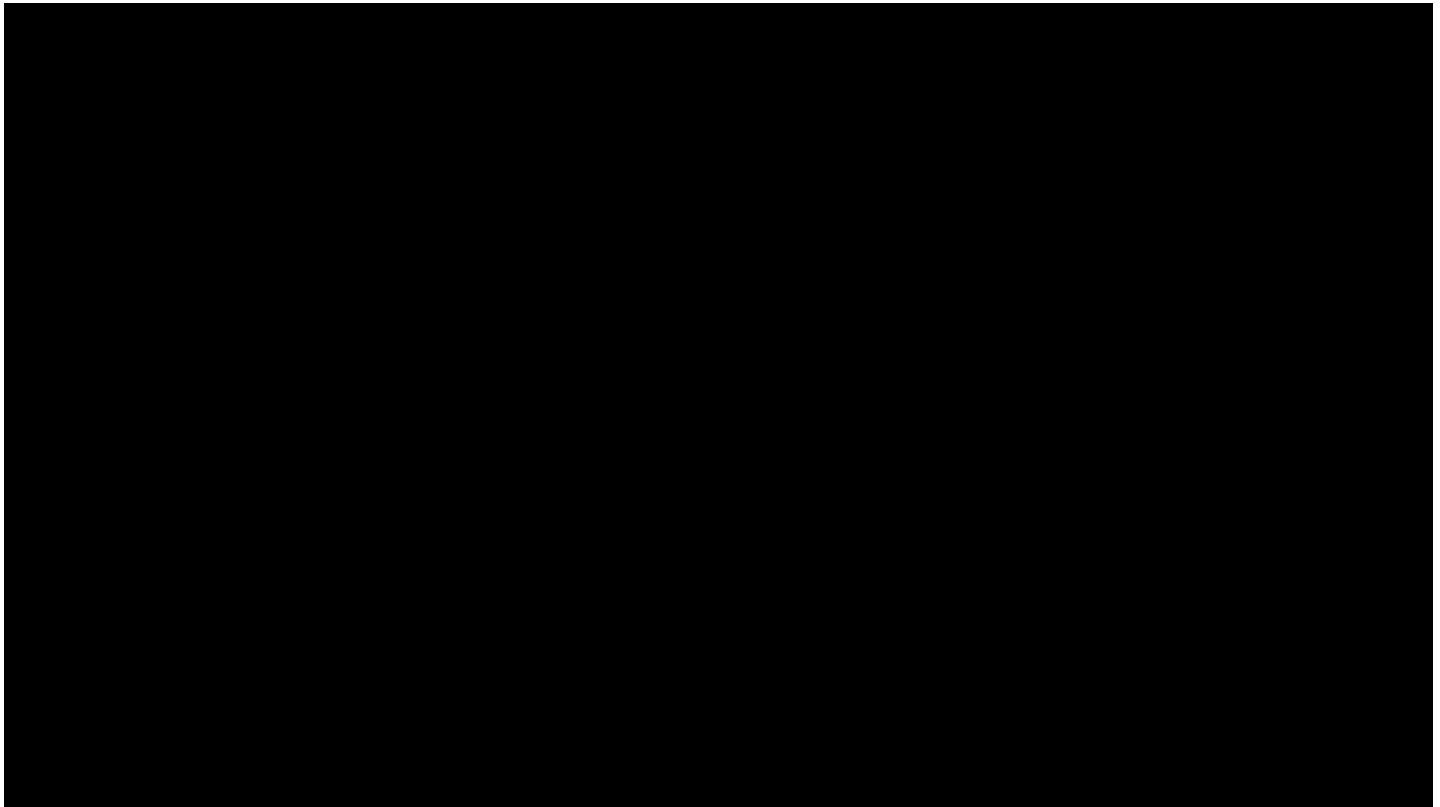
SFY16 PUBLIC HEALTH SPECIALIST ACTIVITY SUMMARY*	
Retail Food Service	48,565
Hotel/Motel	1,558
Public Bathing	4,975
Child Care Food Facilities	588
Rabies	701
Complaints	1,533
<b>TOTAL</b>	<b>57,920</b>

\*Includes Oklahoma and Tulsa Counties



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# Cleveland County Open Streets



# Child Guidance Service

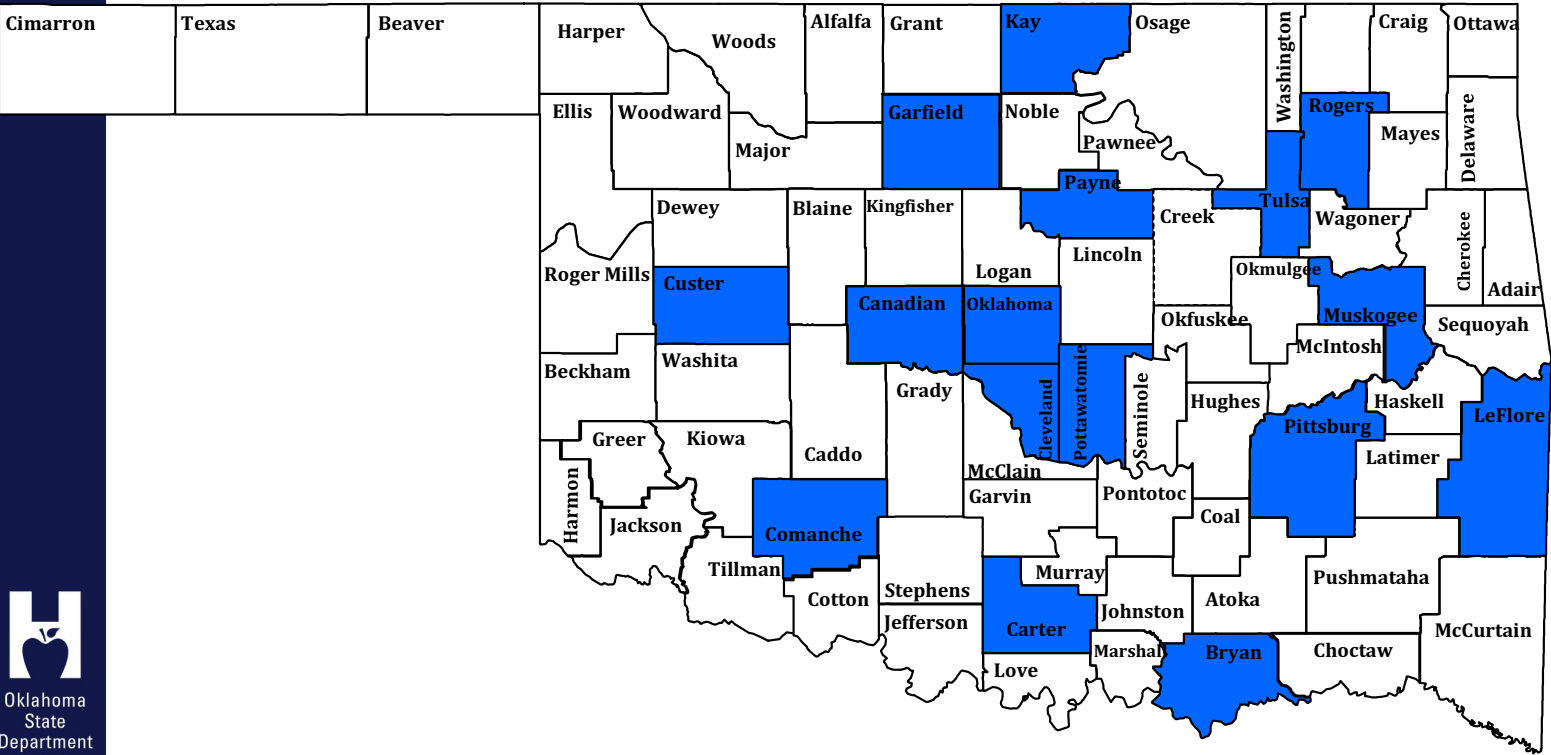
Director: Beth Martin, M.A., C.C.C

- Child Guidance Program-Clinic based services for children birth to age 13
- OKDHS Child Care Warmline-Provides live and automated support for child care facilities
- Abstinence Education Grant Program
- Project LAUNCH (Linking Unmet Needs in Children's Health) Roger's County Pilot
- WIC PLUS+ (Providing Learning Understanding and Support)
- Early Childhood Mental Health Consultation-Coordinated network of consultants that support subsidized child care facilities



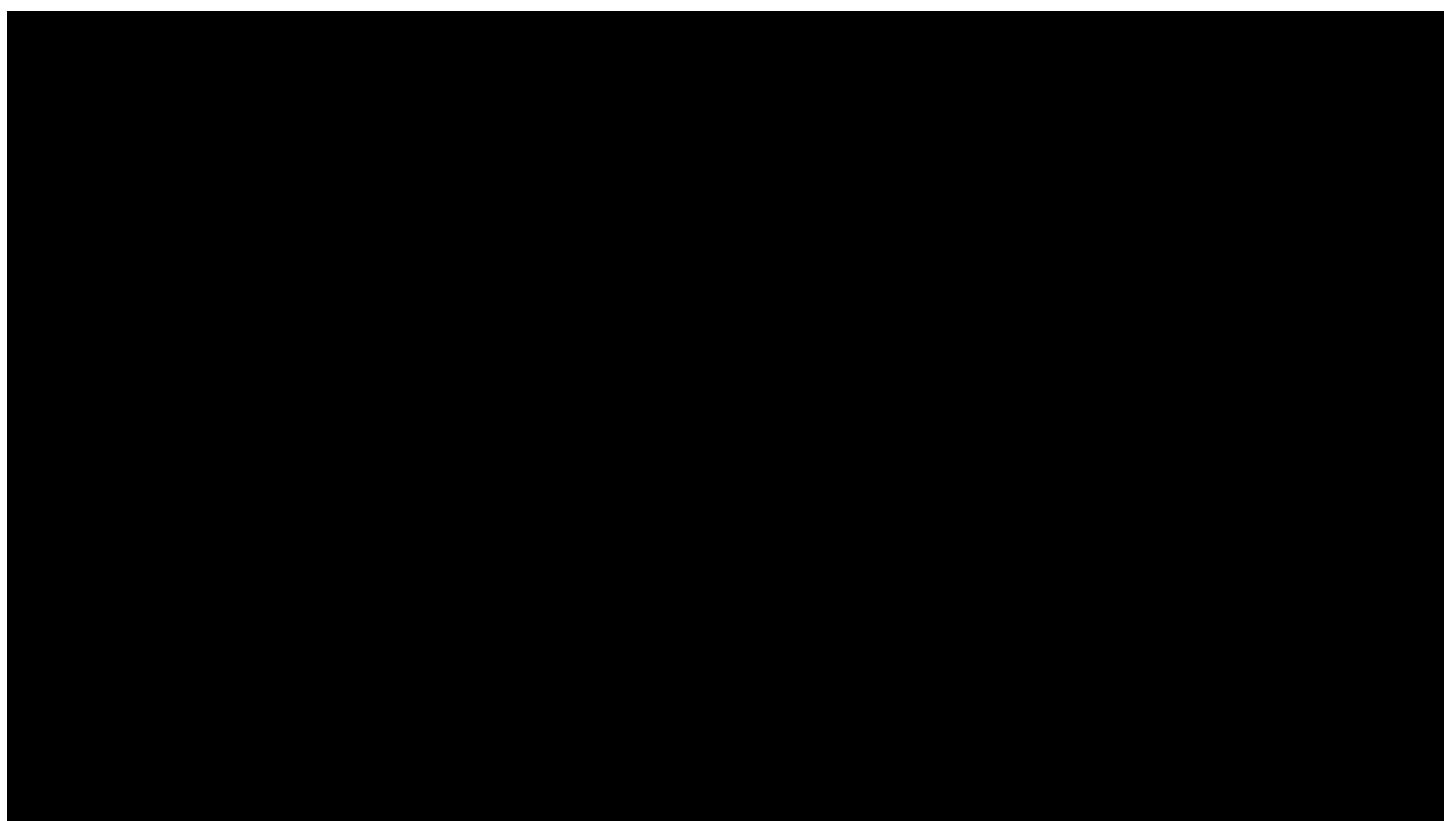
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# Child Guidance Clinic Regional Hubs



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# Project Launch





## **Dental Health Service**

**Director: Jana S. Winfree, DDS, MPH**

**Directs all dental public health programs and advises the Department on matters involving oral health.**

### **Dental Health Education and Tobacco-Use Prevention Program**

**Target Population:** Children and their primary caregivers impacted by public health nurses, WIC personnel, home visitation personnel, MCH staff, health profession students, health educators, partners and stakeholders; and the Oklahoma Dental Association for smoking cessation

#### **Program Description**

- Dental public health outreach and promotion to prevent dental diseases.
- Improve knowledge and motivate behaviors of parents and children concerning oral health and overall health.
- Relay benefits of proper nutrition, fluorides, drinking water, and oral hygiene.
- Relay detriments of sugar-sweetened beverages, sports drinks, prolonged bottle/sippy cup usage, poor eating habits, and smoking.
- Partner with the Oklahoma Dental Association to promote dentists using the Oklahoma Tobacco Helpline.

#### **FY 16 Services**

- Dental education encounters to children 86,000
- Dental education encounters to children 0-5 and caregivers 6,100
- Lectured to partners, OSDH personnel, and students to empower others in relaying the message that dental health is associated with physical, systemic, mental, social, and overall health.



## Community Water Fluoridation Program

**Target Population:** All Oklahomans

### Program Description

- Educate, promote, and support fluoridation efforts within communities via health advocates.
- In partnership with the Oklahoma Dental Association, inform decision-makers and generate publicity for CWF.
- Maintain database for CDC's My Water's Fluoride website.
- Collaborate with Department of Environmental Quality, Water Quality Division.



## Fluoride Varnish Program

**Target Population:** WIC children who visit the County Health Departments (CHDs)

### Program Description

- Train and implement public health nurses in CHDs to apply Fluoride Varnish to the teeth of children to help prevent tooth decay and counsel parents.

### FY 16

- 2.5 Million Oklahomans received fluoridated water (70% of those on public water supplies).
- Updated the State Fluoridation Plan.
- Fluoridation Quality (CDC/ASTDD) awards distributed to deserving water treatment plants.
- Trained public health nurses on children's oral health and Fluoride Varnish application techniques.
- 2,000 children received Fluoride Varnish in 22 CHDs.



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## **Oklahoma Dental Loan Repayment Program**

**Target Population:** Medicaid recipients dependent on the state for dental care

### **Program Description**

- Dental education loan repayment assistance for new Oklahoma licensed dentists for up to five years per dentist (maximum 25 full time equivalent dentists if fully funded).
- Dentists work in designated shortage areas seeing minimum 30% Medicaid patients, or are faculty at the OU College of Dentistry.
- \$25,000 annual assistance per dentist per year.

### **FY 16**

- 33,650 Medicaid encounters by the participating dentists, predominantly children.
- 22 dentists participated (19 in shortage areas and 3 at OUCOD).

## **Oklahoma Oral Health Needs Assessment of Third Grade Children**

### **Program Description**

- Surveillance activity to determine the prevalence of dental disease in 3<sup>rd</sup> grade children.

### **FY16**

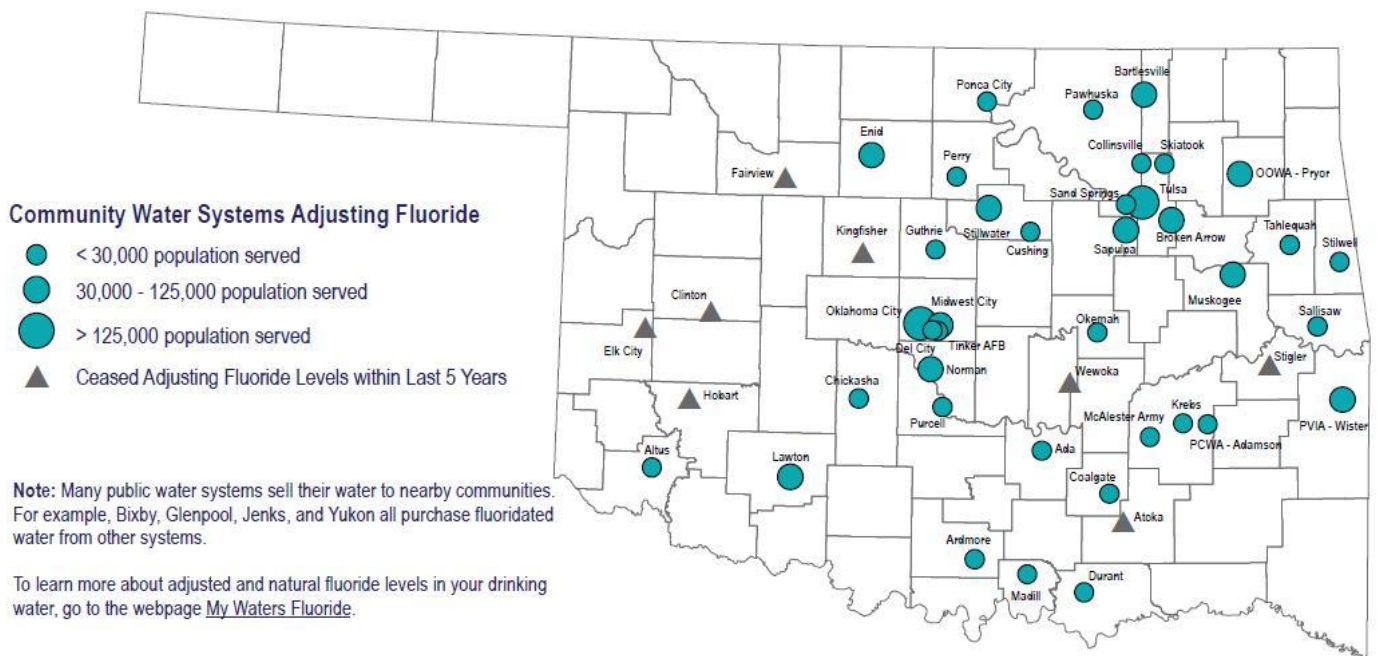
- 1,285 3<sup>rd</sup> grade children received dental screenings and dental education in 36 schools.
- Partnered with OU Colleges of Public Health and Dentistry.
- 66% of 3<sup>rd</sup> grade children have experienced dental decay.

## **2016 Oklahoma Mission of Mercy**

- Mass dental clinic serving Oklahomans unlikely to receive care elsewhere.
- 1,600 adults and children received dental care, education, and had access to immunizations.
- Endorsed by the Oklahoma State Department of Health.

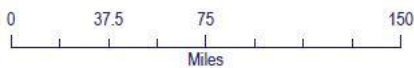


## Status of Water Fluoridation in Oklahoma



**Data Sources:** Water Treatment Plants, Oklahoma Department of Environmental Quality, Environmental Labs, Centers for Disease Control and Prevention. Data compiled by Dental Health Service, March 2017.

Projection/Coordinate System: USGS Albers Equal Area Conic



**Disclaimer:** This map is a compilation of records, information and data from various city, county and state offices and other sources, affecting the area shown, and is the best representation of the data available at the time. The map and data are to be used for reference purposes only. The user acknowledges and accepts all inherent limitations of the map, including the fact that the data are dynamic and in a constant state of maintenance.



Dental Health Service  
Community and Family Health Services  
Oklahoma State Department of Health  
Map created by Health Care Information  
on 12.21.2009. Revised by Community  
Epidemiology and Evaluation 03.20.2017



## Family Support & Prevention Service

Director: Annette Wisk Jacobi, J.D.

### parentPRO – Home Visiting Services

A collection of home visiting programs utilizing three evidence-based models. parentPRO connects families with the program in their area that best meets their needs.

Website: [www.parentPRO.org](http://www.parentPRO.org)

Toll-free number: 1-866-271-7611 (answered in English and Spanish;  
can also connect to the Child Guidance Warmline professionals)

#### 1) Children First: Nurse-Family Partnership Model

**Eligibility:** Client must be a first time mother; household income must be at or below 185% of Federal Poverty Level; and mother must be less than 29 weeks pregnant at enrollment.

**Program Description:** Specially-trained registered nurses work with the mothers to improve pregnancy outcomes, the health and well-being of the child, and the self-sufficiency of the family.

**SFY 2016 Service Numbers:** Within 70 counties, 2,810 families were served and 27,409 number of home visits were completed.

**Funding Sources:** local millage, state general revenue, Medicaid, the federal Maternal, Infant and Early Childhood Home Visiting Grant, and the federal Community-Based Child Abuse Prevention Grant

**SFY 2016 Outcomes** include, but are not limited to:

\* Child Abuse: Of the 1,820 children served, 1,722 of them (95%) had not been named as a potential victim in a child abuse report. Furthermore, 1,819 (99%) have not been named as a victim in a *confirmed* child abuse report.

\* Smoking: 95% of the mothers served quit, reduced, or never began smoking between intake and 26 weeks of pregnancy.

\* Postpartum Depression: 12% of the mothers screened for postpartum depression had a positive screen and required immediate attention by a health care or mental health professional.

\* Breastfeeding: 88% of the mothers initiated breastfeeding.



## **2) Parents as Teachers\***

**Eligibility:** Pregnant mothers or families with children under the age of five years that do not qualify for Children First. Priorities given to families with risk factors stated in the Maternal, Infant and Early Childhood Home Visiting Grant (ie history of child abuse, military family, parent or child with a disability, tobacco used in the home).

**Program Description:** Specially-trained parent educators work to improve parent-child interaction, the child's readiness for school, and the self-sufficiency of the family.

**SFY 2016 Service Numbers:** Within 28 counties, 1,961 families were served and 15,997 number of home visits were completed.

**Funding Sources:** state appropriations to the Oklahoma Child Abuse Prevention Fund, and the federal Maternal, Infant and Early Childhood Home Visiting Grant

**SFY 2016 Outcomes** include, but are not limited to:

\* **Child Abuse:** Of the 726 children served, 566 of them (78%) had not been named as a potential victim in a child abuse report. Furthermore, 674 (93%) have not been named as a victim in a *confirmed* child abuse report.

\* **Smoking:** Of the parents that smoked, 27% reduced or quit smoking.

\* **Postpartum Depression:** Of the mothers screened for postpartum depression, 77% indicated signs of depression and 13% of the mothers' screens required immediate attention by a health care or mental health professional.

\* **Employment:** Of the parents served who were unemployed at enrollment, 48% found work within the year.

**parentPRO Pilot** – Four county health departments are piloting a comprehensive family support system including PAT programs using traditional parent educators and nurse parent educators as well as other services such as case management.

\*During SFY 2016, programs operated under Healthy Families America model, but used the Parents as Teachers curriculum. Beginning in SFY 2017, all programs were required to operate under the Parents as Teachers model only.



### 3) SafeCare – contract with the University of Oklahoma Center on Child Abuse and Neglect

**Eligibility:** Pregnant mothers or families with children under the age of five years experiencing violence, untreated mental illness, and/or substance abuse.

**Program Description:** Specially-trained parent educators work to improve parent-child interaction, home safety, and use of appropriate medical services. An additional module focusing on healthy relationships has been developed, researched and added to the Oklahoma implementation.

**SYF 2016 Service Numbers:** Within Oklahoma and Tulsa Counties, 144 families were served and 2,191 number of home visits were completed.

**Funding Sources:** state appropriations, and the federal Maternal, Infant and Early Childhood Home Visiting Grant

### The Federal Community-Based Child Abuse Prevention Grant (CBCAP)

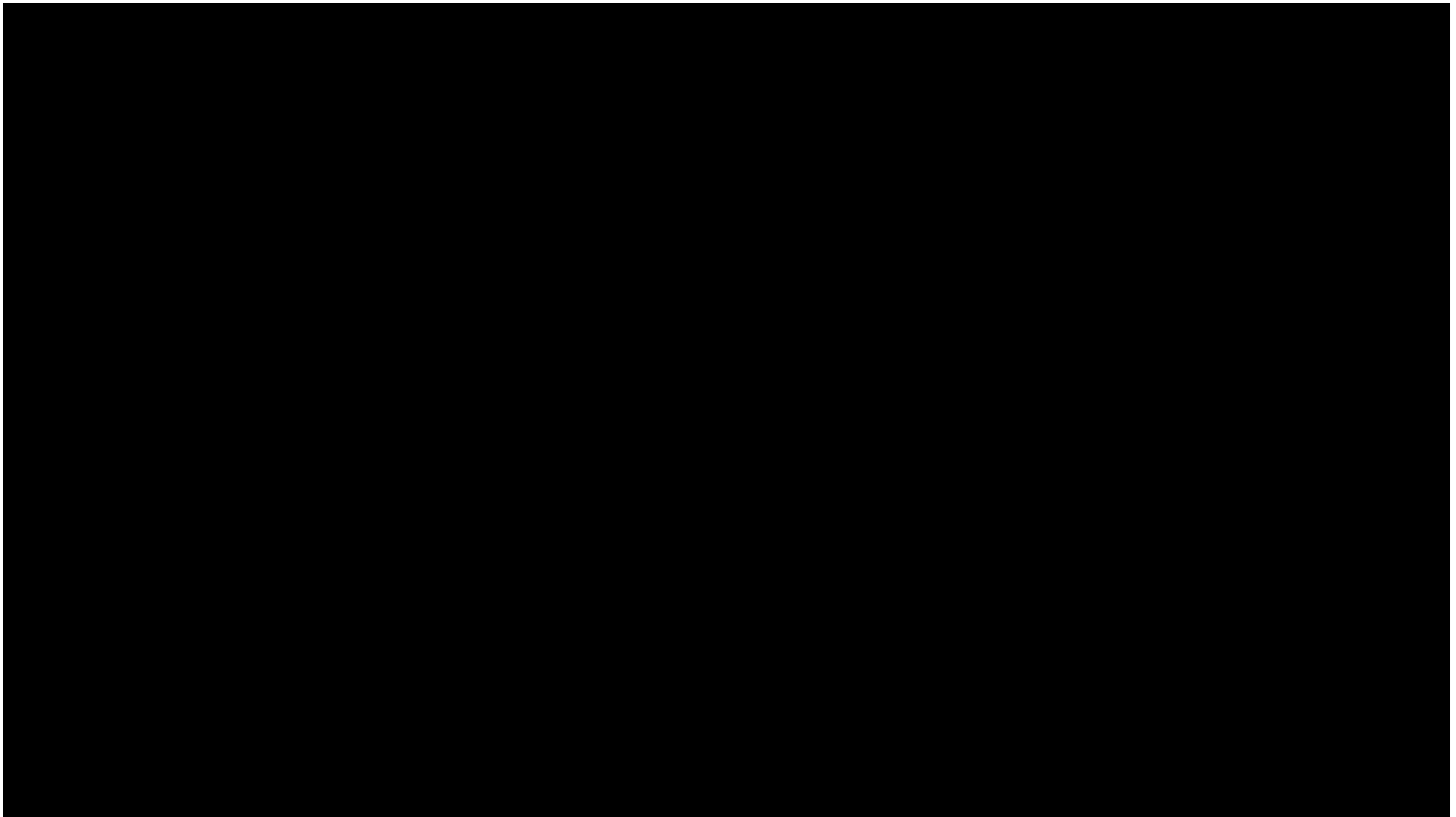
- CBCAP is a federal grant designed to support the development and expansion of community-based, prevention-focused programs and activities that improve child and family well-being as well as reduce the incidents of child maltreatment. Oklahoma efforts have focused on
  - Protective Factors Trainers capable of providing education and information to a wide variety of audiences
  - Training for those working within the prevention field – particularly home visitors/parent educators
  - “Circle of Parents” Support Groups
  - “Incredible Years” Parent Education
  - Shaken baby prevention activities such as the “Period of Purple Crying”
  - Co-sponsoring conferences that enhance professional development
  - General awareness activities

### Alternatives- to-Abortion

- Contracts provided to organizations promote childbirth instead of abortion by providing information, counseling and support services that assist pregnant women or women who believe they may be pregnant to choose childbirth and to make informed decisions regarding the choice of adoption or parenting with respect to their children. State funding is used to support adoption and housing services.



# Parent Pro





# Maternal and Child Health Service

Director: Joyce Marshall, MPH

## Child and Adolescent Health Division

**Target population:** 0 through 21 years of age

### General Activities

- Assure health of all Oklahoma infants, children, and adolescents.
- Develop state health care policies and procedures based on federal and state requirements as well as recognized national guidelines and best practices.
- Provide resources, technical assistance, consultation, and monitoring of health care services
- Monitor health status of the target population.

## Child Health Services

### Program Description

- Provide gap-filling services with a priority of serving the uninsured and underinsured populations: physical exams, indicated lab, and/or treatment of minor acute illnesses.
- Providing clinical services as indicated in county health departments.

### Services Provided

- Under the Title V Block Grant, MCH provided services to 606,335 children in 2015.

## Sudden Infant Death Syndrome (SIDS)/Infant Safe Sleep

- Provide leadership and serve as a resource for SIDS and Infant Safe Sleep activities at the state and community levels.

## Breastfeeding

- Provide leadership and serve as a resource to promote and support state and community level breastfeeding activities.



### **Adolescent Health**

- Assist communities and organizations in promoting and building resilience in youth and addressing health challenges.
- Develop programs that reduce risk-taking behaviors of adolescents (violence, suicide, bullying, unintentional injury, substance abuse).
- Implement teen pregnancy prevention strategies through community-based teen pregnancy prevention projects.

### **Early Childhood**

- Supports leadership and infrastructure for state early childhood system which includes: access to health insurance and a medical home; mental health and social-emotional development; early care and education/child care; parenting education; and family support.

### **Injury Prevention**

- Support for Oklahoma Poison Control Center.
- Provide resources, technical assistance and training to prevent bullying, youth suicide, etc.
- Provide resources and technical assistance in reducing infant abusive head trauma.

### **School Health**

- Provide leadership and coordination for preventive health and safety services to children and families through collaborative partnerships with other state agencies and organizations.
- Activities include development of policy and standards; provision of technical assistance, assessment, outreach, training, and resources.



## **Perinatal and Reproductive Health Division**

**Target Population:** females and males of reproductive age.

### **General Activities**

- Assure health of all Oklahoma infants and reproductive age women and men.
- Develop state health care policies and procedures based on federal and state requirements as well as recognized national guidelines and best practices.
- Provide resources, technical assistance, consultation and monitoring of health care services; and
- Monitor health status of the target population.

## **Family Planning Program**

### **Program Description**

- Assist males and females to make informed decisions regarding family planning services and preconception health screening.
- Promote family involvement and provide community-based education and outreach activities.
- Provide physical exams, indicated lab (e.g., pap screening, sexually transmitted disease screening), pregnancy diagnosis and counseling, education and counseling on prevention of pregnancy and sexually transmitted diseases, information on the different contraceptive methods available, provision of contraceptive methods, and as indicated, referral.
- In SFY 2017, provided clinical services in 72 counties and 97 sites.

### **Services Provided:**

- Served 47,843 individuals in 2016.



## **Perinatal Health/Maternity Services**

### **Program Description:**

- Provide gap filling maternity clinical services with a priority of serving the uninsured population: physical exams, indicated lab (e.g., blood, urine, pap screening, sexually transmitted diseases screening), education, counseling and as indicated, referral.
- Provide maternity clinical services in two counties currently and two additional prospective counties soon.
- Provide preventive health education for women (preconception and interconception) and men of reproductive age.
- Provide leadership for quality improvement initiatives and best practices through collaborative partnership with other state agencies and organizations.

### **Services Provided:**

- Under the Title V Block Grant, MCH served 79,625 Oklahoma pregnant women in 2015.
- Preconception/Interconception health care and education provided in family planning clinics.

## **Maternal Mortality Review**

- Review of all deaths to women while pregnant or within one year of termination of pregnancy from any cause related to or aggravated by the pregnancy.
- Multi-disciplinary team review; team reviews deaths quarterly.
- Recommends systems improvements to reduce preventable maternal deaths and improve pregnancy outcomes.

## **Fetal and Infant Mortality Review**

- Review of fetal and infant deaths.
- Contracts with Oklahoma City County Health Department and Tulsa Health Department.
  - Including metropolitan statistical areas.
- Recommend systems improvements to reduce the number of preventable fetal and infant deaths and improve infant outcomes.



## Maternal and Child Health Assessment

### General Activities:

- Activities include population-based surveillance for assessing risk factors associated with poor health outcomes; program reporting to monitor services offered through local health departments and community clinics; and other surveys to assess health systems and health status of specific MCH populations.
- Contributes evaluation and assessment support to the programs and services provided by MCH and CFHS and collaborates with researchers on health issues affecting the MCH targeted populations.

### Pregnancy Risk Assessment and Monitoring System (PRAMS)

- Ongoing statewide surveillance that collects information about a woman's behaviors and experiences before, during and after pregnancy with information used to guide policy and services to improve mother and infant outcomes.
- Provides data on preconception health, pregnancy intention, prenatal care, breastfeeding, tobacco use, infant safe sleep, postpartum depression, and maternal stressors.

### The Oklahoma Toddler Survey (TOTS)

- Ongoing statewide surveillance that is a two-year follow-back survey to the PRAMS.
- Collects data about the health and well being of Oklahoma's toddler population with information used to guide programs and health policy in Oklahoma.
- Includes questions about healthcare and insurance coverage, illness and injury, childcare, safety, breastfeeding, and family structure.



### **Youth Risk Behavior Survey (YRBS)**

- Statewide survey of Oklahoma public school students in grades 9-12; administered during the spring semester of every odd-numbered year.
- Measures prevalence of health risk behaviors such as sexual behaviors; alcohol, tobacco, and drug use; behaviors contributing to unintentional injury and violence, and physical activity and dietary behaviors.

### **State Systems Development Initiative (SSDI)**

- Special grant from the Maternal and Child Health Bureau designed to develop a multi-linked database that includes data from state registries, population-based surveillance, client services and Medicaid eligibility and reimbursement files for more effective monitoring and evaluation of the health status of the MCH populations.

### **Medicaid – MCH Data Linking Project**

- Collaborative OSDH/OHCA data linking project (e.g., Medicaid, Vital Records, PRAMS) and analyses of data for quality improvement, evaluation and setting of policy, etc.



## Recent Maternal and Child Health Service Significant Accomplishments

- Received **Virginia Apgar Perinatal Leadership Award** for **8% reduction in pre-term births** in last five years (2010-2015.)
- **Decline of 96% in four years in early elective deliveries prior to 39 weeks** in Every Week Counts campaign – a **reduction from approximately 8 per day to 1 every 3.5 days**. Corresponding to this, births from **39-41 weeks increased by 12%** and births at **36-38 weeks decreased by 17%** (2011-2014.) Additionally, a **minimum of \$4.49 saved for every \$1.00 spent** in the program.
- Six birthing hospitals in Oklahoma have received top honors as **nationally designated Baby Friendly Hospitals** and **over 14%** of all Oklahoma babies are now occurring in Baby Friendly hospitals.
- Received **Outstanding Implementation for the Period of PURPLE Crying** award by the National Center on Shaken Baby Syndrome for having **over 85% of newborn parents in Oklahoma** being covered under the evidence-based educational program to reduce infant abusive head trauma incidences.
- Cribs pilot is showing promising behavior changes in infant safe sleep, and **over 60% of all births (including over 60% of all American Indian and African American births)** are covered by birthing hospitals in **infant safe sleep** policy and sleep sack participation program.
- **Teen birth rate for ages 15-17 decreased by almost 40%** in last five years (2010-2015).



# Early Intervention Program (SoonerStart)

**Director:** John Corpolongo, M.S.

## Target Population

- Provides early intervention services statewide to infants and toddlers with developmental delays (birth to 36 months) and their families who are eligible under federal law and the Oklahoma Early Intervention Act.
- The State Department of Education serves as lead agency and the OSDH provides direct services through an interagency contract.

## Program Description

- Conditions eligible for services include, but are not limited to Down syndrome, cerebral palsy, spina bifida, communication disorders, cognitive disabilities, motor impairments, auditory or visual disabilities and autism spectrum disorders.
- Individualized services include both evaluations and intervention and are provided by highly qualified providers such as speech-language pathologists, occupational and physical therapists, early childhood specialists, nurses, psychological clinicians, social workers, nutrition therapists and others.

## Services Provided

- For state fiscal year 2017 (SFY17), 12,899 children aged birth to 3 years were funded to receive screening, evaluation, assessment and services.
- During this same time period, a year-end monthly caseload of 2,923 infants and toddlers was funded, which includes children not eligible for the program, but referred to other programs for services.





## **SFY 12 SoonerStart Significant Accomplishments:**

- SoonerStart providers continue to use an on-line tool (AutismPro) to improve the program's individualized service plans for children with an autism spectrum disorder. On-going training is provided to meet the program's goal for having staff trained in each region to provide evidence-based screening procedures and interventions for autism.
- Ed Plan, the program's web-based data system, was implemented across the state to improve data collection, reporting and analytical capabilities, in accordance with all state and federal requirements. Two training sessions were provided to all teams statewide to support the implementation of this new data system.
- During this time period, 56% of infants and toddlers served were functioning within age expectations by the time they exited the program for their social-emotional skills, 51% in acquiring and using knowledge and skills, and 87% in taking appropriate action to meet their needs. This is significant in view of the children served by SoonerStart have developmental delays or disabilities, or are at high-risk for these conditions.
- Eighty percent (80%) substantially increased their rate of growth in social-emotional skills, 85% in acquiring and using knowledge and skills, and 87% in taking appropriate action to meet their needs.
- These outcomes are reported to the United States Department of Education, Office of Special Education Programs (OSEP) as part of the program's quality improvement and accountability process.



# Community Epidemiology & Evaluation

**Director:** Jennifer Han, PhD, CHES

**Description:** Community Epidemiology and Evaluation provides analytical and evaluative support primarily for Community and Family Health Services programs and county health departments, and works with other programs within and outside of the agency as well as community partners requesting data assistance.

## **Services:**

- Provides epidemiologic, statistical, and evaluation support to programs and partners
  - Develops and implements evaluation plans
  - Researches, reviews, and creates survey instruments
  - Queries, collects, and manages data
  - Analyzes quantitative and qualitative data and prepares reports utilizing enhanced visualization techniques such as maps and infographics
- Coordinates and ensures a competent analytical staff among CFHS program areas through trainings and technical assistance
- Provides technical support on database development and management
- Assists with strategic planning and logic model development
- Produces State of the County's Health Reports



# Women, Infants, and Children Program

**Director:** Terry Bryce

**Target Population:** The target population for WIC is pregnant, breastfeeding, and postpartum women, infants, and children up to the age of five. The income level has to be less than or equal to 185% of the poverty level, and participants must reside in the state of Oklahoma.

## Divisions

- **Administrative Division**
- **Operations Division**
- **Nutrition Division**

## Services

- The unduplicated caseload count served for SFY 2016 was 161,778. It should be noted funding for the program is related to an annualized FFY duplicated caseload number.
- Quality nutrition education and services.
- Breastfeeding promotion and education.
- Monthly supplemental foods containing specific nutritional content.
- Referrals and providing access to other health-care services.
- Supplemental foods provided through a network of 438 WIC vendors (grocers).



### **WIC Service Significant Accomplishments**

- Completed successful statewide implementation of eWIC, utilizing a plastic mag stripe card instead of paper food instruments to deliver participant benefits.
- Component of Oklahoma eWIC will be implemented nationwide simplifying the ordering procedure of special formulas for infants with medical needs.
- Reached agreement with the nine Indian Tribal WIC programs in Oklahoma to partner in a State WIC conference. The Osage Nation will financially sponsor the conference.
- OSDH WIC's breastfeeding initiation rate of 82.1% exceeded Healthy People's 2020 breastfeeding initiation goal of 81.9% in 2014 and continues to climb to the current rate of 85.9%.
- The Breastfeeding Peer Counseling Program has experienced continued growth with expansion to 25 counties and 39 clinics statewide with additional clinics expressing interest in this evidence-based program. Plans are proceeding to collaborate with hospitals interested in having WIC Breastfeeding Peer Counselors work with their newborn infants and mothers to support breastfeeding.
- WIC participants are offered a variety of nutrition education choices to best meet their needs. Participants may attend group classes for facilitated discussion and interaction with others, access online nutrition education when it best fits their schedule or attend an appointment with the clinic's Registered Dietitian to receive individualized nutrition counseling. Currently, a pilot to utilize videoconferencing for group nutrition education is underway to reduce the nutrition therapist's time in travel to multiple clinics, provide coverage for nutrition therapist vacancies, and to make better use of time for provision of specialized nutrition education.
- Selected as Program of the Year for OSDH central office for CY 2016.
- State WIC Director selected by USDA to serve on the National Advisory Council on Maternal, Infant and Fetal Nutrition, representing all State WIC Directors nationwide.

### **FFY 2017 Challenges and Opportunities**

- Continue efforts to reach WIC eligible population to participate in the program. Pursue opportunity to use technology to streamline participant services at the clinic and grocery store level, examples include continued expansion of on-line nutrition education, a grocery store app allowing participants to utilize their cell phones to insure a food item is WIC approved. We are currently exploring the use of text messages to remind participants of their appointments.



# Records Evaluation and Support

**Director:** Mike Ewald

Records Evaluation and Support Division is an infrastructure unit that provides records management and operations support to the county health department administrators and staff. This unit coordinates with central office programs to implement new initiatives and monitor ongoing activities.

RES consists of:

- Seven regionally housed Records Consultants. These consultants are experts in OSDH computer systems, financial reporting requirements and clinical records procedures;
- Two administrative support staff; and
- The Director – an employee with over 35 years of county health department and central office experience.



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# Screening & Special Services

Director: Lisa Canton, RN, MS

The mission of the Screening and Special Services Division is to provide statewide surveillance, screening and specialized programs to protect the health of Oklahoma children and their families.

## Newborn Screening Program

### Target Population

- Every baby born in Oklahoma is required to have a blood test in the first week of life.

### Program Description

- The newborn screen tests every baby for 54 hidden disorders. Babies with these disorders often appear healthy at birth. This makes it difficult for doctors to know if a baby has one of the hidden disorders without a blood test.
- Failure to treat a baby who has one of these disorders within the first month of life can lead to cognitive or intellectual disabilities, severe illness or death.
- If a baby is found to have a disorder immediate care and treatment by a special medical doctor is needed.
- The Program notifies the healthcare provider and family of every out-of-range result and provides follow-up and case management activities until the child is either diagnosed by a specialist with a disorder and placed on treatment or determined not to have the disorder.
- State statute 63 O.S. Section 1-533 and 1-534 gives the Oklahoma State Department of Health the responsibility for operating the program.

### FY 2015 Services

- 53,132 births, 2,479 out-of-range results, 113 diagnosed with a disorder, 286 confirmed to be a carrier of a disorder



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of Health

## Screening & Special Services cont.

### **Newborn Hearing Screening Program**

#### **Target Population**

- Every baby born in Oklahoma is required to have their hearing checked before they leave the hospital.

#### **Program Description**

- Good hearing is important for speech and language development. Hearing problems need to be identified as early as possible. If an infant has a hearing loss, steps can be taken to help the infant learn communication.
- Equipment at the hospital is used to see if an infant's hearing is within normal limits. Babies are also identified for risks of developing hearing loss later in life.
- The Program notifies the healthcare provider and family of every abnormal result and provides follow-up and case management activities until the child is diagnosed by an audiologist with hearing loss and placed in early intervention services.
- The Program provides equipment to SoonerStart, Child Guidance, Parent as Teachers, and OSDH Nursing Service for follow-up hearing screening for children birth to 13 years of age. This includes training, technical assistance, and annual calibration of screening devices.
- State statute 63 O.S. Section 1-534 gives the Oklahoma State Department of Health the responsibility for operating the program.

#### **FY 2015 Services**

- 53,132 births; 5,000 babies required follow-up activities; 200 diagnosed with hearing loss



## **Oklahoma Birth Defects Registry**

### **Target Population**

- Children identified with a birth defect through established case finding criteria.
- Women of child bearing age.

### **Program Description**

- The Program protects and promotes the health of Oklahomans through statewide surveillance and investigation, thereby identifying opportunities to prevent birth defects, optimize early detection of birth defects, and reduce infant mortality.
- The Program provides care coordination to families, linking them to vital resources throughout the state.
- The Program provides education and multivitamins to women of child bearing age to reduce the risk of having a baby with a birth defect.
- State statute 63 O.S. Section 1-550.2 gives the Oklahoma State Department of Health the responsibility for operating the registry and assuring confidentiality of the data collected.

### **FY 2012 Services**

- 52,740 births; 1,957 identified with a birth defect





## Screening & Special Services cont.

### **Oklahoma Childhood Lead Poisoning Prevention Program**

#### **Target Population**

- Every child in Oklahoma is required to have a blood lead screening at 12 and 24 months of age, however the program provides services to children 6 months to 72 months of age.

#### **Program Description**

- In babies and young children whose brains are still developing, even a small amount of lead can cause loss of IQ, learning disabilities, behavioral problems, and anemia.
- The Program conducts surveillance of elevated childhood blood lead levels and provides case management services for children 6 - 72 months who have an elevated blood lead level  $\geq 5\mu\text{g}/\text{dL}$ .
- The Program notifies the healthcare provider and family of every elevated blood lead result and provides follow-up and case management activities until the child's blood lead level reduces below  $5\mu\text{g}/\text{dL}$ .
- The Program also performs environmental investigations for children who are identified with significantly elevated blood lead levels. Environmental investigations provide an opportunity for the source of lead exposure to be identified and removed.
- State statute 63 O.S. Section 1-114.1 gives the Oklahoma State Department of Health the responsibility for operating the program.

#### **FY 2016 Services**

- 48,978 lead test results report to the program; 2,257 children required follow-up activities; 22 environmental investigations performed

